## **Assembly Concurrent Resolution No. 148**

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Adopted in Asseml	bly June 16, 2014
	Chief Clerk of the Assembly
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Adopted in Senate	July 3, 2014
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	Secretary of the Senate
This resolution	was received by the Secretary of State this
day of	, 2014, at
clockм.	
	Deputy Secretary of State

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## RESOLUTION CHAPTER \_\_\_\_\_

Assembly Concurrent Resolution No. 148—Relative to maternal mental health care.

## LEGISLATIVE COUNSEL'S DIGEST

ACR 148, Lowenthal. Task Force on the Status of Maternal Mental Health Care.

This measure would request the California Maternal Mental Health Collaborative, a nonprofit organization, to establish a task force on the status of maternal mental health care.

WHEREAS, In 2010, Assembly Concurrent Resolution 105 (Resolution Chapter 9 of the Statutes of 2010) was enacted and proclaimed the month of May, each year, as Perinatal Depression Awareness Month in California, and called for the formation of a volunteer task force. As a result of Assembly Concurrent Resolution 105, the California Maternal Mental Health Collaborative, an independent nonprofit organization, was formed; and

WHEREAS, Women in their childbearing years account for the largest group of Americans with depression. The mental health of women before, during, and after childbirth is an issue of great concern to women, their families, and their physicians and; therefore, is of interest to the Legislature; and

WHEREAS, Maternal depression and other mood disorders are serious and debilitating, but treatable disorders. Children born to mothers with untreated depression are more likely to have developmental problems and higher utilization of medical and mental health care over their lifetimes. Therefore, it is critical that women who are suffering from depression or another maternal mental health disorder be diagnosed and treated; and

WHEREAS, A task force should be established to study, review, and identify (1) current barriers to screening and diagnosis, (2) current treatment options for both those who are privately insured and those who receive care through the public health system, and (3) evidence based and emerging treatment options that are scalable in public and private health settings. The task force should also

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identify provider population needs and patient needs in order to improve diagnosis and treatment; and

WHEREAS, The task force should consist of 12 to 18 members, appointed by the California Maternal Mental Health Collaborative in consultation with the Assembly and Senate Committees on Health, and include representation from organizations such as the State Department of Health Care Services, the State Department of Public Health, the Office of Perinatal Substance Abuse, the State Department of Developmental Services, the Children and Family Services Division of the State Department of Social Services, First 5 California, the American Congress of Obstetricians and Gynecologists, and other stakeholders; and

WHEREAS, The task force should meet at least eight times a year. Members of the task force will not be compensated, but may be reimbursed for travel expenses by the California Maternal Mental Health Collaborative, to the extent available, for the purpose of attending meetings of the task force. The task force should be funded by private sources; and

WHEREAS, The task force should make recommendations in a white paper no later than December 31, 2015, which should address changes necessary within state and county programs and any other areas deemed necessary; now, therefore, be it

Resolved by the Assembly of the State of California, the Senate thereof concurring, That the Legislature, therefore, requests the California Maternal Mental Health Collaborative, a nonprofit organization, to establish a task force on the status of maternal mental health care in order to further the objectives described in this resolution; and be it further

*Resolved*, That the Chief Clerk of the Assembly transmit copies of this resolution to the author for appropriate distribution.